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MAR 13 2025
SD Secretary of State

Conflict of Interest
ELECTED OFFICIAL
Statement of Financial Interest

Deadline to file: Within **15 days** after the person assumes office.

File with: The **SECRETARY OF STATE** except **local candidates** file with the office where they file their oath of office.

Elected Officials who file: **State Office** elected officials (governor, lieutenant governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands, state legislator, circuit court judge and supreme court justice SDCL 3-1A-2):

Gubernatorial Appointee for whom senate confirmation is required shall file with the secretary of state a statement of financial interest before confirmation SDCL 3-1A-3.

Local Office officials (county commissioner, school board member in a school district with a total enrollment of more than 2,000 students, or commissioner, council member, or mayor in any 1st class municipality SDCL 3-1A-4)

Please print:

Full Name James Francis Dover

Complete Address 3900 West Avera Drive, Sioux Falls, SD

Office *(list District number if applicable)* _____

What is your occupation/profession? Health System President and CEO

****If there are no changes from your previously filed CANDIDATE Financial Interest Statement check the box and sign and date below.** ☐ **NO Changes**

List any source of funds (business or economic relationship) which contributes **more than 10%** of or **more than $2,000** to your family's *(includes spouse, minor children living at home)* **gross income** in the preceding calendar year. This also includes any enterprise in which you or an immediate family member(s) **controls more than 10% of the capital or stock**. Identify who receives the income from each enterprise but do not include the value. (SDCL 3-1A-1)

**The intent of this form is to collect specific information, not generalities. Do not put N/A or leave the grid blank.*

Name of Candidate or Family Member	Name the Source of Funds (Ex: current employer, SD Legislature, 401K benefits, etc.)	Relationship to funds (Ex employee, officer, director, associate, partner, shareholder, owner, member, proprietor, etc.)

Filed this 13th day of March 2025

Monae L. Johnson

SECRETARY OF STATE

I declare and affirm under the penalties of perjury that the information above has been examined by me and to the best of my knowledge and belief is a true, correct and complete representation of myself and my immediate family's financial interests for the preceding calendar year.

(Signature) _____ (Date) 3/6/2025